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PATENT APPLICATION FEE DETERMINATION RECORD

ب:'.

Effective October 1, 2001

Application or Docket Number

Vionyx-0013USA

7,00,7%, 200,300												.73/7
		CLAIMS AS	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			5				RA	Έ	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			5 minus 20=		* &		X\$	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			, mi	nus 3 =	* 0		X42	X42=		OR	X84=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT									
* If the difference in column 1 is less than zero enter "O" in column 2							+14	0=	<u> </u>	OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT	ΆL	370	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMA	SMALL ENTITY			OTHER SMALL I		
	CLAIMS			HIGH			1		ADDI-	1 1		ADDI
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	RAT	E	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$:	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X42	=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM		+140)=.		OR	+280=	
								TAL			TOTAL	
	(Column 1) (Column 2) (Column 3)									OR	ADDIT. FEE	
_				·	•	•						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** '		=	X\$ 9)=		OR	X\$18=	
	Independent	*	Minus	***			X42	=		OR	X84=	
	FINOT PRESE	NTATION OF MU	DETIPLE DEP	ENDEN	CLAIM		+140)=		OR	+280=	
•								TAL		OR	TOTAL	
ADDIT. FEE												
		(Column 1) CLAIMS		(Colur		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=-	X42				X84=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* if the entry in column 1 is less than the entry in column 2, writ "0" in column 3.								=		OR	+280=	
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *If th "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If th "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
•	n in riigh si Nu Th "Highest Num	mber Previously Pai ber Previously Pai	d For (Total or	Ind p nd	s less tha ent) is th	n 3, enter "3." highest numbe	er found in th	е арр	r priat box	in col	umn 1.	